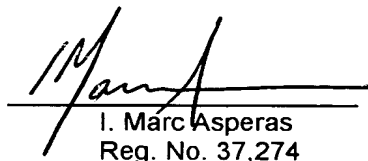


FOR:		(Col. 1) NO. FILED	(Col. 2) NO. EXTRA	OTHER THAN A SMALL ENTITY RATE FEE	
BASIC FEE		XXXXXXXX	XXXXXXXXXX	XXXXX	\$ 710
TOTAL CLAIMS		17 - 20 =	0	x 18 =	\$ 0
INDEP CLAIMS		1 - 3 =	0	x 80 =	\$ 0
0	MULTIPLE DEPENDENT CLAIM PRESENTED			+270.=	\$ 0
				TOTAL	\$ 710

- ☐ A fee of \$40.00 to cover recordation of the assignment.
- ☒ Please charge my **Deposit Account No. 19-2179** in the amount of \$ 710.00. A duplicate copy of this sheet is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to **Deposit Account No. 19-2179**. A duplicate copy of this sheet is enclosed.
- ☒ Any additional filing fees required under 37 CFR 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Dated:

July 24, 2001

  
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Reg. No. 37,274

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